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Bib Data Sheet

CONFIRMATION NO. 8077

<b>SERIAL NUMBER</b> 09/934,178	<b>FILING DATE</b> 08/21/2001 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> S63.2-10079
<b>APPLICANTS</b> Brian J. Brown, Hanover, MN; Michael L. Davis, Shorewood, MN;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF 08/511,076 08/03/1995 <i>Pre bilic</i> WHICH IS A <del>CON</del> OF 08/396,569 03/01/1995 ABN CIP				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/07/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 7
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 490				
<b>TITLE</b> Longitudinally flexible expandable stent				
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	